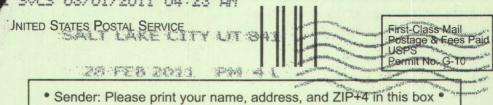
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
DUCHESNE COUNTY RD DEPT PO BOX 356	The state of the s
DUCHESNE UT 84021-0356	3. Service Type ☐ Certified Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
PB 2/22/2011 M0470028	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7009 3410	
PS Form 3811, February 2004 Domestic Ret	rurn Receipt 102595-02-M-1540



PENNY BERRY STATE OF UTAH DIVISION OF OIL GAS & MINING PO BOX 145801 SALT LAKE CITY UT 84114-5801

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U.S. Postal Service TM CERTIFIED MAIL RECEIPT N (Domestic Mail Only; No Insurance Coverage Provided) П For delivery information visit our website at www.usps.com® 2/22/201A MO470028 m 420 Escalation Postage Certifled Fee 1000 has Heretil Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 470 Total Post m DUCHESNE COUNTY RD DEPT Sent To -2007 PO BOX 356 Street, Apt. or PO Box EAST OLD HWY 40 City, State. **DUCHESNE UT 84021-0356** PS Form 3800.